

CLAIMS ONLY							Application Number 10719015	Filing Date
Applicant(s)								
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend		
1	1							
2		1						
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Total Indep	1							
Total Depend	5							
Total Claims	6							
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